SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND SERVICE: **Bayfield County**

Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138



DEC 1 0 2018 Not Entered Bayfield Co. Zoning Dept.

Permit #:	19-0196
Date:	6-25-19
Amount Paid:	\$125 12-11-18 1350 TBA ATF 3-7-19
Refund:	HAS HIP 3-119

INSTRUCTIONS: No p Checks are made pays DO NOT START CONS	able to: Bayfield (County Zoning	Department.	TO APPI	LICANT.	Rece	ur ipted	FILL OUT	IN INK (NO	O PENCIL)	
TYPE OF PERMIT R	EQUESTED-	LANI	OUSE SA	NITAR	Y D PRIVY D	CONDITIO	NAL USE	☐ SPECIAL	USF F	3.O.A. 🗆	OTHER
Owner's Name:	Rip		Fect LLC	Mailir (56	ng Address: 96 Canyon W					5-1-2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	one:
Address of Property:	PRE	742		tro	State/Zip: A V V V V V V V V V V V V V V V V V V	lumber:	F 5	4847)	62	776 8563
Authorized Agent: (Person Signing Appl	ication on behal	f of Owner(s))	Agent	t Phone:	ngent Mailing	g Address (in	clude City/State,	/Zip):	Attache	
PROJECT LOCATION	Legal Descrip	tion: (Use T	ax Statement)	Tax II	19292	4			Recorded I		□ No howing Ownership) 572526
S £ 1/4, _	J E 1/4	Gov't Lot	Lot(s)	CSM		1 Doc# L	Lot(s) No.	Block(s) No.	Subdivision	1:	
Section	, Township	(1) N, R	ange 08 (N	Town of:	live	5		Lot Size	Acre 5	age QCCS
Shoreland —	Creek or Lar	idward side o	of Floodplain?	If y	eam (incl. Intermittent) escontinue	Distance S	Structure is	from Shoreline	IS	Property in	
Non-Shoreland	> Is Propert	y/Land withi	n 1000 feet of La		nd or Flowage escontinue			from Shoreline		□ Yes ☑ No	☐ Yes ☑ No
Non-Shoreland		A .	4		77	16			-: 72		
Value at Time of Completion * include	Proje	ect	# of Stori	es	Foundation	# of bedroon in	ns	Sewer/S	at Type of anitary Sys	stem	Type of Water
donated time & material	☐ New Cons	truction	☐ 1-Story		☐ Basement	structur		unicipal/City	he propert	:y?	property □ City
ė /	☐ Addition/	Alteration	1-Story +	Loft	☐ Foundation	□ 2	□ (N	lew) Sanitary	Specify Typ	oe:	
25,000	☐ Conversio	n	☐ 2-Story		Inone	□ 3		nitary (Exists			
	Relocate (ivy (Pit) or			lon) Move
	☐ Run a Bus Property	iness on			Use ☐ Year Round	None		ortable (w/serv ompost Toilet		:)	
		ing ste	ucture		X Seasonal			one			
					,						
Existing Structure		ng applied fo	r is relevant to i	t)	Length:		Widtl		1	Height:	15'
Proposed Constru	uction:				Length:		Widtl	1:		Height:	
Proposed Us	e 🗸				Proposed Structu	re			Dimer		Square Footage
		-			ture on property)				(X	- /	2/12
	×	Kesidenc	e (i.e. cabin, h	unting	shack, etc.) → Ø	2 1/200 1	600		$(1) \times X$	201	240
Residential	Use		with a Porc	h		800 ac) 1,5	,	(ie X		120
Rec'd fo	or Issuanne		with (2 nd) P		200	30,00	C CO		(x		
			with a Decl	<					(X	()	
	25 2018		with (2 nd) D			9 10			(X	(, ,)	. ·
Commercial			with Attach						(X	()	
	arial Staff	_			☐ sleeping quarters,				(X		
					ate)				(X		
☐ Municipal U	lse 🗀								(X		
			y Building (s						(X		
		Accessor	y Building Add	lition/	Alteration (specify				(x)	
		Special U	se: (explain) _						(×	()	
		Condition	nal Use: (explai	n)					(X	()	
		Other: (ex	1. 1. 1					_	(X	()	
		FAILURE TO	OBTAIN A PERMIT	or STAR	TING CONSTRUCTION \	VITHOUT A PE	RMIT WILL R	ESULT IN PENALT	ES		
(are) responsible for the	detail and accuracy o y relying on this infor ble time for the purp	any accompanyin of all information mation I (we) am	g information) has be I (we) am (are) provid (are) providing in or	en examir ling and th	ned by me (us) and to the b nat it will be relied upon by application. I (we) consent	est of my (our) k Bayfield County	nowledge and being in determining	pelief it is true, corre whether to issue a p	ct and complete ermit. I (we) fu	rther accept liab	lity which may be a

Owner(s): POLE 2++CC t (If there are Multiple Owners listed on the Deed A) where prust sign or letter(s) of authorization must accompany this application) ner(s) a letter of authorization must accompany this application Authorized Agent: Copy of Tax Statement APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE 10n Address to send permit

box below: Draw or Sketch your Property		770	
(7) Chaudhastian of D		e applying for) Fill Out in In	k – NO PENCIL
(2) Show / Indicate: North (N	d Construction) on Plot Plan		
	way <u>and</u> (*) Frontage Roading Structures on your Prop		
	(W); (*) Septic Tank (ST); ([*] (*) River; (*) Stream/Cree	f) Drain Field (DF); (*) Holding Tank (HT) and/or (*)	Privy (P)
, , , , , , , , , , , , , , , , , , , ,	ands; or (*) Slopes over 20		
(1)	000 '		> ,
		* Structure val	ue ~ \$40,000 }
			,
Pit	-		
DP:	,4	12/21/02	+ privu
	•	* structure	, 5.10 1
00	12×20	located on	property
2)	cabin	prior to s	sale Hransfer
1	Structure	of Daned	1 2 100
		of Pight	7 7
diveway			2/30/18
	*	Z. II	.)
V		Dwell on property	
Please complete (1) – (7) above (prior to continui	ng)		
(8) Setbacks: (measured to the close	est point)	Changes in plans must be approved	by the Planning & Zoning Dept.
Description	Measurement	Description	With
	A Co	Description	Measurement
Setback from the Centerline of Platted Road Setback from the Established Right-of-Way	590 Feet	Setback from the Lake (ordinary high-water ma Setback from the River , Stream , Creek	rk) Feet
Setback from the North Lot Line	10	Setback from the Bank or Bluff	Feet
Setback from the South Lot Line	400 Feet	Setback from Wetland	Feet
Setback from the West Lot Line Setback from the East Lot Line	400 Feet	20% Slope Area on the property Elevation of Floodplain	Yes, No
	(OCO) reet	Elevation of Floouplain	70 A Feet
othack to Sontic Tank or II-IIII T	NA Feet	Setback to Well	N + Feet
	NA Feet		y 0 7 (100)
Setback to Drain Field Setback to Privy (Portable, Composting)	250 Feet	e boundary line from which the sethack must be measured must be visible.	
Setback to Drain Field Setback to Privy (Portable, Composting) Frior to the placement or construction of a structure within ten (10) feet The previously surveyed corner or marked by a licensed surveyor at the Frior to the placement or construction of a structure more than ten (10)	of the minimum required setback, the owner's expense.	e boundary line from which the setback must be measured must be visible	e from one previously surveyed corner to the
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City, Village, State or Federal
May Also Be Required
After-the-Fact

LAND USE - X
SANITARY - Pit Privy
SIGN SPECIAL - Class A
CONDITIONAL BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	19-0196 Issued To: Ripple Effect LLC / Cynthia Nelson, Agent															
S ½ of Location:	SE	1/4	of	NE	1/4	Section	12	Township	47	N.	Range	8	W.	Town of	Iron River	
Gov't Lot	Lot					Blo	ck	Sul	Subdivision					CSM#		
GOVILLOI												10		4 64 - 1		

For: Residential Use: [1.5- Story; Residence (12' x 20') = 240 sq. ft.; Porch (6' x 19') = 114 sq. ft.;]
Total Overall = 359 sq. ft.

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): A uniform dwelling code (UDC) permit must be obtained from the locally contracted UDC inspection agency prior to the start of construction. Must meet and maintain set-backs. Must meet and maintain setbacks. Condition per recorded privy agreement.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Todd Norwood

Authorized Issuing Official

June 25, 2019

Date

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT **BAYFIELD COUNTY, WISCONSIN**



Permit #:	19-0199
Date:	6-25-19
Amount Paid:	\$756-17-19
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department

Bayfield Co. Zoning Dep

DO NOT START CON	STRUCTION UNTIL ALL P	EKIVII / 3 FI	AVE BEEN 1330ED TO APPI	LICANT.		FILL OU	TIN INK (NO PE	NCIL)		
TYPE OF PERMIT	REQUESTED-	LAND	USE SANITARY	PRIVY	CONDITIONA	L USE SPECIAL	USE ☐ B.O.	A. 🗆 (OTHER	
Owner's Name:			Mailir	ng Address:		State/Zip:		Telephor	ne:	
Donalde	Helen Hyde	0	- PO	Box 214	I	on River W	JI 54847	115 2	92-1104	
Address of Property				State/Zip:				Cell Pho	ne:	
9295 N	Shore Drive		TO	onRiver W	T 5484'	7		Sa	me	
Contractor:					lumber:	,		Plumber	Phone:	
american'	Steelinc		866	-730-9865				7		
Authorized Agent: (Person Signing Application on behalf of Owner(s)) Agent Phone: Agent Mailing Address (include City/State/Zip): Written Authorization Attached										
-					6	-		☐ Yes		
PROJECT			Tax II						owing Ownership)	
LOCATION	Legal Description:	(Use Ta	ax Statement)	9167			914		25	
1/4	1/4 Go	ov't Lot	Lot(s) CSM		Doc# Lot(s) No. Block(s) No.	Subdivision:			
		4	9 19	1/275						
Section OF	, Township 4	1 N. Ra	ange 08 W	Town of:			Lot Size	Acrea	ge 46	
				IronRi	VCI			0	.70	
	☐ Is Property/Lan	nd within	300 feet of River, Stre	am (incl. Intermittent)	Distance Stru	cture is from Shorelin	e: In Drov	erty in	Are Wetlands	
Schaueland	Creek or Landwar	rd side o	of Floodplain?	escontinue			feet Floodpla	in Zone?	Present?	
Shoreland —	☐ Is Property/Lan	nd within	1000 feet of Lake, Por	nd or Flowage	Distance Stru	cture is from Shorelin	e: 📮	Yes	☐ Yes	
			If y	escontinue -			feet	No	□ No	
☐ Non-Shoreland						The state of the s				
Value at Time						100 TO 10		All the same of		
of Completion					# of	W	nat Type of		Type of	
* include	Project		# of Stories	Foundation	bedrooms in		Sanitary System	n	Water	
donated time & material					structure	Is on t	the property?		property	
material	New Construct	tion	■ 1-Story	☐ Basement	□ 1	Municipal/City			City	
	☐ Addition/Alter		☐ 1-Story + Loft	☐ Foundation	□ 2	☐ (New) Sanitary	Specify Type:			
\$7,000.00	☐ Conversion		☐ 2-Story	· Gravel	□ 3	☐ Sanitary (Exists) Specify Type:			
	☐ Relocate (existing	g bldg)				☐ Privy (Pit) or		n 200 gall	on)	
	☐ Run a Business	on		Use	None	☐ Portable (w/ser				
	Property			Year Round		☐ Compost Toilet	6.			
I I						☐ None				
						- None				
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ox below: Draw or Sketch your Property (regardless of what you are applying for) Fill Out in Ink – NO PENCIL (1) Show Location of: **Proposed Construction** (2) Show / Indicate: North (N) on Plot Plan Show Location of (*): (3) (*) Driveway and (*) Frontage Road (Name Frontage Road) (4)Show: All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (5) Show: (6) Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (7)Show any (*): (*) Wetlands; or (*) Slopes over 20% North Shore Drive House

Please complete (1) – (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurement	Description	Measurement		
Setback from the Centerline of Platted Road	46 Feet	Setback from the Lake (ordinary high-water mark)		Feet	
Setback from the Established Right-of-Way	3 6 Feet	Setback from the River, Stream, Creek		Feet	
		Setback from the Bank or Bluff		Feet	
Setback from the North Lot Line	Feet				
Setback from the South Lot Line	Feet	Setback from Wetland		Feet	
Setback from the West Lot Line	Feet	20% Slope Area on the property	☐ Yes	□ No	
Setback from the East Lot Line	37 Feet	Elevation of Floodplain		Feet	
Setback to Septic Tank or Holding Tank	Feet	Setback to Well		Feet	
Setback to Drain Field	Feet	OGRACIA CO TVEII		reet	
Setback to Privy (Portable, Composting)	Feet				

other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number:		# of bedrooms:	Sanitary Date:		
Permit Denied (Date):	Reason for Denial:					
Permit #: 19-0199	Permit Date:	25-19				
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming □ Yes (Deed of Recondance of Parcel of Parcel of Recondance of Parcel of Parc	ous Lot(s)) No	Mitigation Required Mitigation Attached	☐ Yes ☐ No ☐ Yes ☐ No	Affidavit Required Affidavit Attached		No No
Granted by Variance (B.O.A.) □ Yes □ No Case #:		Previously Granted by ☐ Yes 🌓 No	y Variance (B.O.A.) Case	· #:		
Was Proposed Building Site Delineated Yes No			es Represented by Owner Was Property Surveyed	Yes		□ No
Inspection Record: owner on-site and Project location.	d indicated Appears cod	property 1:	ines and	Zoning District Lakes Classificatio	(R))	le me
Date of inspection: 6 12/19	Inspected by:	Norwood		Date of Re-Inspec		
Condition(s): Town, Committee or Board Conditions Attack Signature of Inspector:	May not be us habitation. No pressure in str	water under	Setbacks	Date of Appro	oval: 6/1-	l.19
Hold For Sanitary: Hold For TBA:	Hold For Affic	lavit: 🗌	Hold For Fees:		4/2	41

own, City, Village, State or Federal Permits May Also Be Required

LAND USE - X
SANITARY - City
SIGN SPECIAL CONDITIONAL BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	19-	0199	1		Issued	d To: I	Donald & Helen Hyde									
Location:	-	1/4	of	-	1/4	Section	n 8	Township	47	N.	Range	8	W.	Town of	Iron River	
Gov't Lot			L	_ot	9	E	Block	Sul	bdivisio	on				CSM#1	19	

For: Residential Accessory Structure: [1- Story; Carport (24' x 30') = 720 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): May not be used for human habitation. No water under pressure in structure. Must meet and maintain setbacks.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Todd Norwood

Authorized Issuing Official

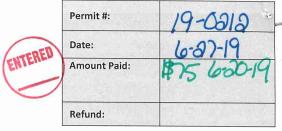
June 25, 2019

Date

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND LE TO: **Bayfield County**

Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT **BAYFIELD COUNTY, WISCONSIN**



INSTRUCTIONS: No permits will be issued until all fees are paid.

TYPE OF PERMIT REQUESTED→ K LAND USE SANITARY PRIVY CONDITIONAL USE SPECIAL USE B.O.	O.A. OTHER				
Owner's Name: Mailing Address: 7-2 (City/State/Zip:	Telephone:				
Address of Property: Address of Property: One	Cell Phone:				
65340 County Huy H Iron River, WI 54847	630-258-7849				
Contractor: Contractor Phone: Plumber:	Plumber Phone:				
Self					
Authorized Agent: (Person Signing Application on behalf of Owner(s)) Agent Phone: Agent Mailing Address (include City/State/Zip):	Written Authorization Attached				
PROJECT Local Description (the Turk) Tax ID# 19852 Recorded Docu	☐ Yes ☐ No cument: (Showing Ownership)				
LOCATION Legal Description: (Use Tax Statement)					
1/4,1/4 Gov't Lot Lot(s) CSM Vol & Page CSM Doc # Lot(s) No. Block(s) No. Subdivision:					
Town of:	Acreage / 760				
Section 28, Township 47 N, Range 08 W Trow River	3.010				
☐ Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Distance Structure is from Shoreline:					
Creek or Landward side of Floodplain? If yes—continue feet	operty in Are Wetlands Present?				
X SHOTEIGHU —	Yes Yes				
	K No ⊠ No				
□ Non-Shoreland					
Value at Time of Completion # of What Type of	Type of				
* include Project # of Stories Foundation bedrooms Sewer/Sanitary System					
donated time & structure structure	on property				
material New Construction 1-Story □ Basement □ 1 □ Municipal/City Municipal/City					
☐ Addition/Alteration ☐ 1-Story + Loft ☐ Foundation ☐ 2 ☐ (New) Sanitary Specify Type:					
\$ Addition/Alteration 1-Story + Loft Foundation 2 (New) Sanitary Specify Type: _	> Well				
77000 Conversion 2-Story X 5/4 b 3 Sanitary (Exists) Specify Type:	<u></u>				
77,000 Conversion 2-Story X 5/4 b 3 Sanitary (Exists) Specify Type:	<u></u>				
Conversion 2-Story S/4 3 Sanitary (Exists) Specify Type: Relocate (existing bldg) Privy (Pit) or Vaulted (mir	<u></u>				
Conversion 2-Story S S S Sanitary (Exists) Specify Type:	<u></u>				
Conversion 2-Story S S S Sanitary (Exists) Specify Type: Privy (Pit) or Vaulted (min Vaulted Vau	well : Septic □ □ □ □ □ □ □ □ □				
Conversion 2-Story S S S Sanitary (Exists) Specify Type: S S S S S S S S S	<u></u>				
Conversion 2-Story S S S Sanitary (Exists) Specify Type: S S S S S S S S S	Well Septic in 200 gallon) leight: leight: / 4 '				
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Conversion 2-Story S S S Sanitary (Exists) Specify Type: Relocate (existing bldg) Privy (Pit) or Vaulted (min Run a Business on Property Year Round Compost Toilet None Proposed Construction: Length: Width: He Proposed Construction: Proposed Structure Proposed Structure Dimension Dimension X S S S S S S S S S	Well Septic in 200 gallon) leight: leight: / //				
Conversion 2-Story S S S Sanitary (Exists) Specify Type: Relocate (existing bldg) Privy (Pit) or Vaulted (mir Run a Business on Property Year Round Compost Toilet None Existing Structure: (if permit being applied for is relevant to it) Length: Width: He Proposed Construction: Length: Width: Z Y He Proposed Use Principal Structure (first structure on property) X Residence (i.e. cabin, hunting shack, etc.) X X	Well Septic in 200 gallon) leight: leight: / //				
Conversion	Well Septic in 200 gallon) leight: leight: / //				
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Conversion 2-Story	Well Septic in 200 gallon) leight: leight: / //				
Conversion 2-Story	Well Well Septic				
Conversion 2-Story	Well Well Septic				
Conversion 2-Story X S 4 3 X Sanitary (Exists) Specify Types: Relocate (existing bidg)	Well Well Septic				
Conversion 2-Story X S L 3 X Sanitary (Exists) Specify Types: Relocate (existing bidg)	Well Well Septic				
Conversion 2-Story X S/4 3 X Sanitary (Exists) Specify Types: Privy (Pit) or Vaulted (mir Nun a Business on Property Year Round Drompst Toilet None Existing Structure: (if permit being applied for is relevant to it) Length: Width: He Proposed Construction: Length: Width: Z / Y He Proposed Use Privy (Pit) or Vaulted (mir None Portable (w/service contract) None Existing Structure: (if permit being applied for is relevant to it) Length: Width: He None Existing Structure: (if permit being applied for is relevant to it) Length: Width: He None Proposed Use Proposed Structure Dimension Width: Z / Y He Principal Structure: (first structure on property) (Well Well Septic				
Conversion 2-Story X 5/4 3 X Sanitary (Exists) Specify Types: Relocate (existing bldg)	Well Well Septic				
Conversion 2-Story X S B 3	Well Septic				
Conversion 2-Story	Well Septic				
Conversion 2-Story X S/4 B 3	Well Septic				

Copy of Tax Statement

<u>Attach</u>

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit

Fill Out in Ink - NO PENCIL

- (1) Show Location of:
- Show / Indicate: (2)
- **Proposed Construction** North (N) on Plot Plan
- Show Location of (*): (3)
- (4)Show:
- Show: (5)(6)Show any (*):
- (*) Driveway and (*) Frontage Road (Name Frontage Road)
 - All Existing Structures on your Property
 - (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
- (7) Show any (*): (*) Wetlands; or (*) Slopes over 20%

See Assached

Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measurem	ent		Description	Measur	Measurement		
Setback from the Centerline of Platted Road	· · · · · · · · · · · · · · · · · · ·							
Setback from the Established Right-of-Way		Feet		Setback from the River, Stream, Creek		Z7D Feet		
				Setback from the Bank or Bluff		Feet		
Setback from the North Lot Line	230	Feet		7				
Setback from the South Lot Line	150	Feet		Setback from Wetland		Feet		
Setback from the West Lot Line	21	Feet		20% Slope Area on the property (140')	XYes	□ No		
Setback from the East Lot Line	10'-1"	Feet		Elevation of Floodplain		Feet		
Setback to Septic Tank or Holding Tank	120	Feet		Setback to Well	60	Feet		
Setback to Drain Field	10	Feet						
Setback to Privy (Portable, Composting)	_	Feet						

other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

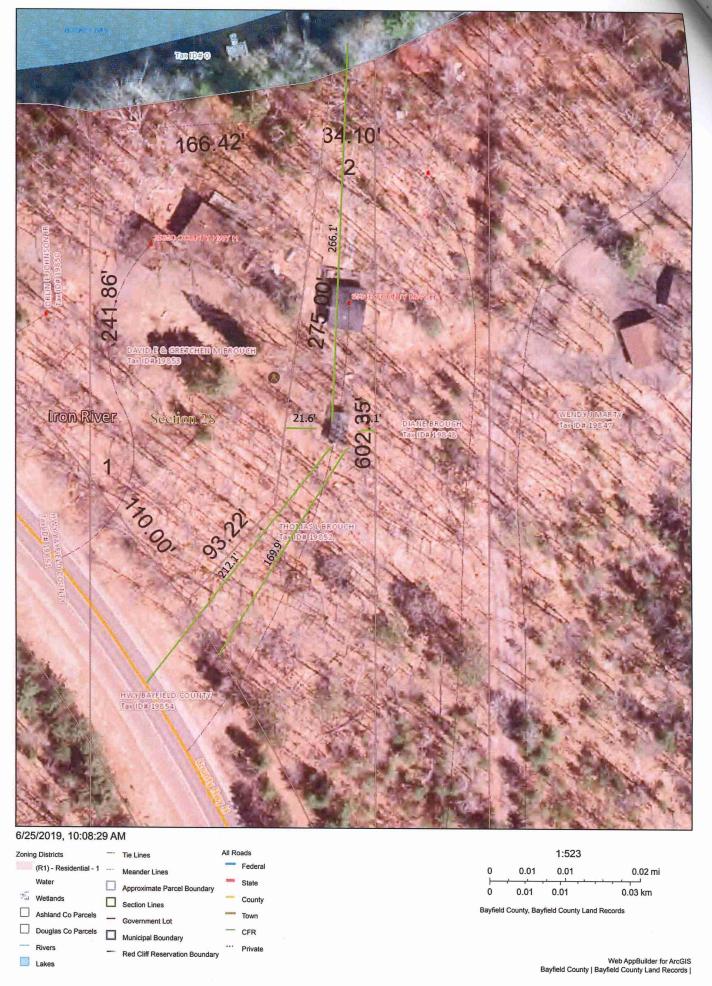
Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number:	135	# of bedrooms: 2	Sanitary Date: 4/23/10					
Permit Denied (Date):	Reason for Denial:								
Permit #: 19-0818	Permit Date: 6-27-1	07-19							
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Recor Yes (Fused/Contigue) Yes Yes	ous Lot(s))	igation Required igation Attached		Affidavit Required					
Granted by Variance (B.O.A.) ☐ Yes No Case #:		viously Granted by es (No	/ Variance (B.O.A.)	#:					
Was Parcel Legally Created Was Proposed Building Site Delineated ✓ Yes □ No	CSM W	Vere Property Line	es Represented by Owner Was Property Surveyed	Yes No					
Inspection Record: Project 5. te and produce compliant.	operly lines well	-staked	. Appeals	Zoning District (RI) Lakes Classification (I)					
				Date of Re-Inspection:					
Condition(s): Town, Committee or Board Conditions Atta	ched?	ey need to be atta	ched.)	nuscuting &					
Structure Shall not be used for homen habitation. No pressurized water in structure without approved connection to Powth. Structure Must be 10 feet from property lines and 10 ft from septic drainfield.									
Signature of Inspector: Toold Norwoo	d			Date of Approval: 6 /26 /19					
Hold For Sanitary:	Hold For Affidavit:		Hold For Fees:						

Bayfield County Web AppBuilder



City, Village, State or Federal
Remits May Also Be Required

LAND USE - X SANITARY -SIGN -SPECIAL -CONDITIONAL -BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	19	9-02	212			Issue	d To: T l	nomas	Brouch							
Location:	_		1/4	of	<u>.</u>	1/4	Section	28	Township	47	N.	Range	8	W.	Town of	Iron River
Gov't Lot		Lot		_ot	2	Block		Subdivision				CSM# 350				

For: Residential Accessory Structure: [1- Story; Garage (30' x 24') = 720 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Structure shall not be used for human habitation / sleeping purposes. No pressurized water in structure without an approved connection to POWTS. Must meet and maintain setback 10 foot setback from property lines and septic.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Todd Norwood

Authorized Issuing Official

June 27, 2019

Date